

## HOME Program Homeownership Assistance and Rental Housing Project Set-up Report

		Mark Appropriate Box <input type="checkbox"/> Original Submission <input type="checkbox"/> Revision	
<b>Part A: Activity Information</b>			
1. Activity Number:	2. Name of Participant:	3. CHDO Tax ID Number	
4. Type of Activity (check one): (1) <input type="checkbox"/> Rehabilitation Only (2) <input type="checkbox"/> New Construction Only		5. CHDO Loan 1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No	
(3) <input type="checkbox"/> Acquisition Only (4) <input type="checkbox"/> Acquisition & Rehabilitation (5) <input type="checkbox"/> Acquisition & New Construction			
6. Total HOME Funds for Project:		\$	
<b>a. Source of Funds</b>		<b>b. Dollar Amount of Funds</b>	
		\$	
		\$	
		\$	
		\$	
Total Estimated Cost of Project		\$	
<b>Part B: Project Information</b>			
1. Street Address of Project			
a. City		b. State	c. Zip Code
2. Last Name of Owner		First Name of Owner	
3. Mailing Address of Owner			
a. City		b. State	c. Zip Code
d. Phone (Including Area Code)	e. Estimated Units Upon Completion	f. Total HOME-Assisted Units Upon Completion	
4. Tenure Type (Check one box only) (1) <input type="checkbox"/> Rental (2) <input type="checkbox"/> Homeownership First Time Buyer (3) <input type="checkbox"/> Homeownership Rehabilitation	5. Type of Ownership (1) <input type="checkbox"/> Individual      (4) <input type="checkbox"/> Not-for-Profit (2) <input type="checkbox"/> Partnership      (5) <input type="checkbox"/> Publicly Owned (3) <input type="checkbox"/> Corporation      (9) <input type="checkbox"/> Other	5. CHDOS Only (check one box) (1) <input type="checkbox"/> Owned (2) <input type="checkbox"/> Sponsored (3) <input type="checkbox"/> Developed	6. County Code